

DATE OF REQUEST

REQUEST FOR VAULT/SECURE AREA AND/OR FILING EQUIPMENT

T O T H R U	CIA RECORDS MANAGEMENT OFFICER	F R O M	ORIGINATORS NAME AND EXTENSION		
	COMPONENT RECORDS OFFICER		ROOM NUMBER AND BUILDING		
	DIRECTORATE RECORDS OFFICER		DIRECTORATE/COMPONENT/DIVISION		
NEEDED ITEMS AND/OR ASSISTANCE (do not complete if Forms 88 or 2620 attached)		ATTACHMENTS			
		FORM 88 FOR EQUIPMENT AND/OR SUPPLIES			
		IS EQUIPMENT OR SUPPLIES A NEW ITEM OR PREVIOUSLY APPROVED			YES NO
		FORM 1490 FOR PTI'S			
		FORM 2620 FOR VAULT/SECURE AREA			

JUSTIFICATION (Why is it needed, new function, expansion of existing system, what alternatives were considered, etc.)

ATTACH ADDITIONAL SHEETS IF NECESSARY

NUMBER AND VALUE OF EQUIPMENT RETURNED TO STOCK/TRANSFERRED TO OTHER OFFICES

2 DRAWER SAFES	\$	CABINETS	\$
4 DRAWER SAFES	\$	MAP CASES	\$
BOOKCASES	\$	OTHER (specify)	
SHELVING	\$		\$
POWERFILES	\$		\$

SAVINGS

MANHOURS	VALUED AT	\$	OTHER SAVINGS (specify)
SPACE (sq ft)		\$	

APPROVALS

SIGNATURE OF ORIGINATOR	DATE	DIRECTORATE SENIOR OFFICIAL	DATE
COMPONENT RECORDS OFFICER	DATE	RAB ANALYST	DATE
DIRECTORATE RECORDS OFFICER	DATE	CHIEF, INFORMATION SYSTEMS ANALYSIS STAFF	DATE

RAB USE ONLY

REQUISITION NO.

VOUCHER NO.